



CONSTRUCTION MIDWEST, INC.

3531 Nevada Avenue North • New Hope, Minnesota 55427
(763) 536-8336 • FAX (763) 536-8530 • (800) 288-8322

APPLICATION FOR CREDIT
(Complete in full and sign below)

COMPANY NAME _____ TEL _____
ADDRESS _____ FAX _____
_____ EMAIL _____

YEAR ESTABLISHED _____ ENTITY TYPE (CIRCLE): SOLE PRIOPRIETOR C-CORP S-CORP LLC OTHER
TAX ID NUMBER _____ (IF SALES TAX EXEMPT, ATTACH EXEMPT CERTIFICATE)

PRINCIPAL NAME _____ PRINCIPAL NAME _____
HOME ADDRESS _____ HOME ADDRESS _____
_____ _____
HOME PHONE _____ HOME PHONE _____
MOBILE PHONE _____ MOBILE PHONE _____
EMAIL _____ EMAIL _____

ACCOUNTS PAYABLE CONTACT _____

BANK INFORMATION

BANK NAME _____ CONTACT NAME _____
ADDRESS _____ TELEPHONE _____
_____ FAX NUMBER _____
ACCOUNT NUMBER _____

TRADE REFERENCES

1) NAME _____ TELEPHONE _____
ADDRESS _____ FAX _____

2) NAME _____ TELEPHONE _____
ADDRESS _____ FAX _____

CREDIT AGREEMENT:

I warrant the above information provided to be true. I grant permission to Construction Midwest, Inc. (CMI) to investigate applicable credit references, including commercial and consumer credit checks. I understand that credit information regarding the account may be provided to credit reporting agencies or, upon my request, as a reference. I acknowledge and agree that CMI's Terms and Conditions of Sale shall apply for all sales of goods by CMI. I agree to pay CMI invoices on the following terms: Net 30, unless different payment terms are specified on CMI invoices. Past due amounts may bear interest up to 18% annually or the maximum rate allowed by law. I understand that any credit given by CMI is discretionary and may be revoked at any time. I agree to pay all charges and fees applied to any and all returned checks or other payment forms. I agree to be subject to jurisdiction in Hennepin County, Minnesota. If the account is placed for collection, or if services of an attorney are required to enforce this Credit Application, I agree to pay all costs and fees, including reasonable attorney's fees.

PRINT NAME OF OFFICER/TITLE SIGNATURE DATE

PRINT NAME OF OFFICER/TITLE SIGNATURE DATE